

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>af</i>	<i>000000</i>	<i>7/2/00</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>KD</i>	<i>68972</i>	<i>8/24/00</i>

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7/2/00
2	✓	✓	7/2/00
3	✓	✓	7/2/00
4	✓	✓	7/2/00
5	✓	✓	7/2/00
6	✓	✓	7/2/00
7	✓	✓	7/2/00
8	✓	✓	7/2/00
9	✓	✓	7/2/00
10	✓	✓	7/2/00
11	✓	✓	7/2/00
12	✓	✓	7/2/00
13	✓	✓	7/2/00
14	✓	✓	7/2/00
15	✓	✓	7/2/00
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18	✓	✓	7/2/00
19	✓	✓	7/2/00
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26	✓	✓	7/2/00
27	✓	✓	7/2/00
28	✓	✓	7/2/00
29	✓	✓	7/2/00
30	✓	✓	7/2/00
31	✓	✓	7/2/00
32	✓	✓	7/2/00
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36	✓	✓	7/2/00
37	✓	✓	7/2/00
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39	✓	✓	7/2/00
40	✓	✓	7/2/00
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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